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The Importance of Behavioral Science in HIV Prevention

The epidemic of HIV infection and AIDS continues to take a tremendous toll in the United States and throughout the world. Through the end of 1995, more than 500,000 cases of AIDS had been reported in the United States, and approximately 1 million persons in this country are believed to be currently infected with HIV, the virus that causes AIDS. HIV infection and AIDS have become the leading cause of death among young Americans 25-44 years of age.

HIV-AIDS is different from many other infectious diseases: it has a near 100 percent fatality rate and its spread is based primarily on sexual activity and drug use, behaviors that are not well addressed through traditional public health venues. It became clear early in the HIV/AIDS epidemic that traditional infectious disease control tools, such as vaccines and antibiotics, would not be quickly available for HIV infection and AIDS, and that behavior change was necessary for persons and populations at risk for this disease. With no prospect for a cure in the foreseeable future, public health officials realized we must invest heavily in primary prevention using behavioral interventions.

Today, formal research and community experience have demonstrated that interventions can reduce risk behaviors, yet there is still much to be learned about which behavioral interventions are most effective. Producing behavioral changes necessary to prevent HIV infection or transmission remains a considerable and unique public health challenge, since HIV can be transmitted with relatively few instances of risk-taking behavior. In contrast, adverse health effects from behaviors such as smoking or unhealthy eating and exercise habits generally require years of performing the risk behaviors to result in lung cancer or emphysema, or heart disease. Thus, "[s]uccess in HIV prevention often requires helping people make and maintain highly consistent behavior changes, often with very little margin for error or relapses—a challenge virtually unprecedented in the behavioral sciences." (1)

At the Centers for Disease Control and Prevention, we agree with the Institute of Medicine's assessment that a solid understanding of the comparative effectiveness of behavior change interventions is essential to control the epidemic of HIV infection and AIDS, and that this knowledge will require a long-term commitment to behavioral research related to HIV-AIDS prevention. As with most research, we learn not only from our successes, but also from our failures. (2) This knowledge is crucial to enhance and strengthen the behavioral approach to HIV prevention.

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This special volume of Public Health Reports presents a variety of methods, based on behavioral science, that have been employed in developing interventions for HIV prevention, particularly for programs targeted at high-risk, hard-to-reach populations. CDC is committed to continued research and evaluation of behavioral interventions to prevent the further spread of this deadly disease.

References

1. Kelly, J. A., et al. Psychological interventions to prevent HIV infection are urgently needed. *Amer Psychol* 1993; 48(10); 1023-1034.
2. Institute of Medicine. *AIDS and Behavior: An Integrated Approach*. Washington, DC: National Academy Press, 1994.